

Atty. Dkt. No. 035451-0143



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Robertson et al.

Title:

USER INTERFACE TECHNIQUE FOR MANAGING AN ACTIVE

CALL

Appl. No.:

To Be Determined

Filing Date: To Be Determined

Examiner:

To Be Determined

Art Unit:

To Be Determined

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, Washington, D.C. 20231. EL716400288US October 17, 2001 (Express Mail Label Number) (Date of Deposit) Karen Meier Printed Name

UTILITY PATENT APPLICATION **TRANSMITTAL**

Commissioner for Patents **Box PATENT APPLICATION** Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

> Ryan Robertson 314 27th Avenue E Seattle, Washington 98112

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Stephane Maes 453 N. Rengstorff Avenue, #11 Mountain View, California 94043

Timothy Twerdahl 200 University Avenue Los Altos, California 94022

Carl Stone 775 Harrison Campbell, California 95008 [] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (18 pages).
- [X] Formal drawings (10 sheets, Figures 1-5D).
- [X] Declaration and Power of Attorney (5 pages).
- [X] Assignment of the invention to Palm, Inc.
- [X] Assignment Recordation Cover Sheet.
- [X] Check in the amount of \$40.00 for Assignment recordation.
- [] Small Entity statement.
- [] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [] Information Disclosure Statement.
- [] Form PTO-1449 with copies of listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in		Extra				Fee
			Basic Fee	Claims		Rate		Totals	
Basic Fee							\$740.00		\$740.00
Total Claims:	22	-	20	=	2	x	\$18.00	= -	\$36.00
Independents:	3		3	_ =	, O	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$280.00							= -	\$0.00	
							SUBTOTAL:	= -	\$776.00
[] Small Entity Fees Apply (subtract ½ of above):								= _	\$0.00
•					TOT	AL F	ILING FEE:	= -	\$776.00

- [X] A check in the amount of \$776.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-

dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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